

JUN 12 2008

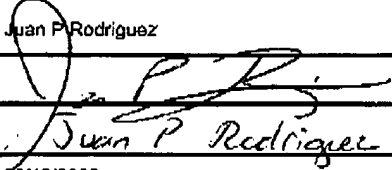
PTO/SB/Z1 (01-08)

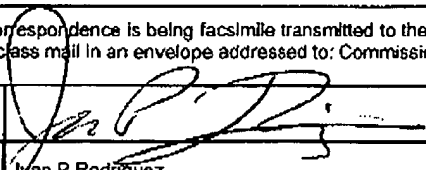
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/016,815
	Filing Date	10/30/2001
	First Named Inventor	Cherisse M. Nicastro
	Art Unit	3694
	Examiner Name	Basil, Abdul
	Attorney Docket Number	TRIRG-01002US0
Total Number of Pages in This Submission		1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Power of Attorney and Correspondence Address Indication Form (SB81)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Juan P Rodriguez		
Signature			
Printed name	Juan P Rodriguez		
Date	06/12/2008	Reg. No.	58,499

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/018,815
Filing Date	10/30/2001
First Named Inventor	Cherisse M. Nicastro
Title	Business Asset Management System Us
Art Unit	3694
Examiner Name	Basit, Abdul
Attorney Docket Number	TRIRG-01002US0

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Juan P Rodriguez	58,499

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☒ Firm or Individual Name TRIRIGA LLC.

Address 6700 Via Austi Parkway

City Las Vegas State Nevada Zip 89119

Country United States

Telephone 1-702-932-4444 Email legal@tririga.com

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Bart J. Verdirame</i>	Date	06/12/2008
Name	Bart J. Verdirame, Esq	Telephone	1-702-932-4444
Title and Company	Vice President and General Counsel		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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